



REQUEST FOR APPOINTMENT FORM (ONLY FOR TEMPORARY VISAS)

Please fill out the form in **UPPERCASE ONLY**

THERE IS NO CHARGE FOR THIS FORM

IMPORTANT NOTICE:

ALL VISA APPLICANTS MUST SUBMIT VISA APPLICATIONS USING THE ON-LINE DS-156 ELECTRONIC VISA APPLICATION FORM (EVAF) AT: <https://evisaforms.state.gov/ds156.asp>
HANDWRITTEN OR TYPED APPLICATIONS WILL NO LONGER BE ACCEPTED.

1. APPLICANTS ASKING A NON-IMMIGRANT VISA APPOINTMENT (**Names exactly as in your passport**):
APPLICANTS MUST BE RESIDENTS OF ALBANIA - IF A FAMILY PLEASE INCLUDE IN ONE REQUEST

	NAME	SURNAME	DATE OF BIRTH	CITY OF RESIDENCE
1.				
2.				
3.				
4.				
5.				

2. MAIL ADDRESS IN ALBANIA (REQUIRED):

3. PLEASE ANSWER BY:

- ☐ E-MAIL (Point 6)
☐ MAIL (Point 2)

4. PHONE/MOBILE NUMBER:

5. FAX NUMBER:

6. E-MAIL ADDRESS:
(PLEASE WRITE CLEARLY)

7. PURPOSE OF TRAVEL (put "X" in the appropriate box):

- ☐ VISITOR FOR PLEASURE/FAMILY VISIT/BUSINESS
☐ WORK (**H Visa - Must have Form I-797**)
☐ STUDY (**F Visa - Must have Form I-20**)
☐ EXCHANGE VISITOR (**J VISA - Must have Form DS-2019**)
☐ OTHER (Explain): _____

NOTE: For more information please visit: http://tirana.usembassy.gov/general_information4.html

8. PROPOSED DATE OF TRAVEL TO U.S.A.:
(APPROXIMATELY)

9. IMPORTANT FACTS:

- a) You should request an appointment a minimum of 6 weeks before your planned travel.
- b) Please DO NOT send supporting documentation along with this request. Any documentation submitted will be discarded.
- c) Fax this form to: **+355-4-374-957**, or mail it to:
U.S. Embassy, Consular Office, Elbasani Str., No. 103, Tirana, Albania
- d) Based on point 1 of this form, You will receive an appointment letter notification together with the necessary forms and requirements.

DATE (mm/dd/yy)

SIGNATURE